

LASATA CARE CENTER

W76 N677 WAUWATOSA RD

CEDARBURG 53012 Phone:(262) 377-5060

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 203

Total Licensed Bed Capacity (12/31/04): 203

Number of Residents on 12/31/04: 197

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 197

County

Skilled

No

Yes

Yes

197

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		31.5	
Home Health Care	No	Developmental Disabilities	0.0	Under 65	5.1	1 - 4 Years		42.6	
Supp. Home Care-Personal Care	No	Mental Illness (Org./Psy)	39.6	65 - 74	3.6	More Than 4 Years		25.9	
Supp. Home Care-Household Services	No	Mental Illness (Other)	6.1	75 - 84	28.9			100.0	
Day Services	No	Alcohol & Other Drug Abuse	0.0	85 - 94	50.3	*****			
Respite Care	No	Para-, Quadra-, Hemiplegic	0.5	95 & Over	12.2	Full-Time Equivalent			
Adult Day Care	No	Cancer	3.6			Nursing Staff per 100 Residents			
Adult Day Health Care	No	Fractures	2.0		100.0	(12/31/04)			
Congregate Meals	No	Cardiovascular	13.7	65 & Over	94.9	-----			
Home Delivered Meals	No	Cerebrovascular	5.1			RNs		11.3	
Other Meals	No	Diabetes	2.5	Gender	%	LPNs		5.0	
Transportation	No	Respiratory	1.0			Nursing Assistants,			
Referral Service	No	Other Medical Conditions	25.9	Male	21.8	Aides, & Orderlies			
Other Services	No		-----	Female	78.2				
Provide Day Programming for			100.0						
Mentally Ill	No								
Provide Day Programming for									
Developmentally Disabled	No				100.0				

## Method of Reimbursement

	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care					
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	14	100.0	311	2	1.4	146	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	16	8.1
Skilled Care	0	0.0	0	129	92.8	124	0	0.0	0	44	100.0	203	0	0.0	0	0	0.0	0	173	87.8
Intermediate	---	---	---	8	5.8	102	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	8	4.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	14	100.0		139	100.0		0	0.0		44	100.0		0	0.0		0	0.0		197	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	6.6	Bathing	7.6	61.9	30.5	197
Private Home/With Home Health	0.0	Dressing	23.4	67.5	9.1	197
Other Nursing Homes	25.4	Transferring	40.1	46.7	13.2	197
Acute Care Hospitals	61.5	Toilet Use	29.9	54.3	15.7	197
Psych. Hosp.-MR/DD Facilities	0.0	Eating	79.2	16.8	4.1	197
Rehabilitation Hospitals	0.0	*****				
Other Locations	6.6	Continence		%	Special Treatments	%
Total Number of Admissions	122	Indwelling Or External Catheter	7.6	Receiving Respiratory Care		0.0
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	52.8	Receiving Tracheostomy Care		0.0
Private Home/No Home Health	35.3	Occ/Freq. Incontinent of Bowel	27.9	Receiving Suctioning		0.0
Private Home/With Home Health	0.0			Receiving Ostomy Care		2.5
Other Nursing Homes	2.5	Mobility		Receiving Tube Feeding		0.0
Acute Care Hospitals	13.4	Physically Restrained	0.0	Receiving Mechanically Altered Diets		36.5
Psych. Hosp.-MR/DD Facilities	0.0			*****		
Rehabilitation Hospitals	0.0	Skin Care		Other Resident Characteristics		
Other Locations	2.5	With Pressure Sores	1.0	Have Advance Directives		95.9
Deaths	46.2	With Rashes	4.6	Medications		
Total Number of Discharges				Receiving Psychoactive Drugs		24.4
(Including Deaths)	119					

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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities  
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	This Facility %	Ownership: Government Peer %	Group Ratio	Bed Size: 200+ Peer %	Group Ratio	Licensure: Skilled Peer %	Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.0	94.7	1.02	88.9	1.09	87.3	1.11	88.8	1.09
Current Residents from In-County	84.8	85.4	0.99	83.3	1.02	85.8	0.99	77.4	1.09
Admissions from In-County, Still Residing	43.4	37.5	1.16	25.0	1.73	20.1	2.17	19.4	2.24
Admissions/Average Daily Census	61.9	64.3	0.96	116.5	0.53	173.5	0.36	146.5	0.42
Discharges/Average Daily Census	60.4	66.5	0.91	119.3	0.51	174.4	0.35	148.0	0.41
Discharges To Private Residence/Average Daily Census	21.3	18.9	1.13	41.9	0.51	70.3	0.30	66.9	0.32
Residents Receiving Skilled Care	95.9	92.9	1.03	95.1	1.01	95.8	1.00	89.9	1.07
Residents Aged 65 and Older	94.9	95.2	1.00	91.8	1.03	90.7	1.05	87.9	1.08
Title 19 (Medicaid) Funded Residents	70.6	72.0	0.98	64.3	1.10	56.7	1.25	66.1	1.07
Private Pay Funded Residents	22.3	21.7	1.03	19.3	1.16	23.3	0.96	20.6	1.09
Developmentally Disabled Residents	0.0	1.0	0.00	0.8	0.00	0.9	0.00	6.0	0.00
Mentally Ill Residents	45.7	42.7	1.07	39.0	1.17	32.5	1.40	33.6	1.36
General Medical Service Residents	25.9	12.9	2.01	21.2	1.22	24.0	1.08	21.1	1.23
Impaired ADL (Mean)	39.4	45.9	0.86	50.4	0.78	51.7	0.76	49.4	0.80
Psychological Problems	24.4	42.4	0.57	56.9	0.43	56.2	0.43	57.7	0.42
Nursing Care Required (Mean)	5.6	7.4	0.75	8.1	0.69	7.7	0.72	7.4	0.75